

NT SECRETARY OF COMMERCE AND COMMISSIONER OF PATENTS AND TRADEMARKS

NOTICE OF FILING/CLAIM FEE(S) DUE

TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: _	09/055818
	Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee =	T 1
	Sm./Lg.				Sm. Entity		Total
Basic Filing F€	201/101				om: Eddiy	Lg. Entity	240
Total Claims >20	203/103	121 -20=	1 ~ 3			101	790
Independent Claims >3	_	2	101	X		22	2222
	202/102			X		t	
Mult. Dep Claim Present	204/104					104 2	270
Surcharge	205/105					105	120
English Translation	139					100	100
							
TOTAL FEE CALCULA	TION						.3412
Fees due upon filing th	e application					·	<u> </u>

Total Filing Fees Due = \$ 3412,00
Less Filing Fees Submitted - \$
BALANCE DUE = $\frac{3412,00}{}$
Office of Initial Patent Examination

FORM OIPE-RAM-01 (Rev. 5/97)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

09/055818

CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
FOR		NUMBE	ER FILED	NUMBER		RATE	FEE		RATE	FEE
BASIC FEE			395.00	OR		790.00				
TOTA	AL CLAIMS	17	7 / minus	3 20 = * / _	1	x\$11=		OR	x\$22=	2222
INDE	PENDENT CLA	AIMS	3 minu	us 3 = *		x41=		OR	x82=	
MULT	TIPLE DEPEND	DENT CLAIM PRE	SENT			+135=			+270=	270
* If the difference in column 1 is less than zero, enter "0" in column 2						OR	TOTAL	270 3282		
		CLAIMS AS			DLE CU	P T TOTAL		OR		
		(Column 1)	AMENDED	(Column 2)	(Column 3)	SMAL	L ENTITY	OR	OTHER THAN OR SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
ME	Independent	*	Minus	***	=	x41=		OR	x82=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=							OR	+270=		
		(Column 1)		(Column 2)	(Column 3)	TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
ENT B	* * * * *	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AENDMENT	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
-	Independent	*	Minus	***	=	x41=		OR	x82=	
۷_	FIRST PRES	SENTATION OF	MULTIPLE	DEPENDENT CL	AIM	+135=		OR	+270=	
(Column 1) (Column 2) (Column 3) ADDIT. FEE						OR	TOTAL ADDIT. FEE			
AMENDMENT C	报 :\$6	CLAIMS REMAINING AFTER AMENDMENT	A Cati	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
ME	Independent	*	Minus	***	=	x41=		OR	x82=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=						OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										